

# STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

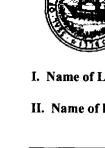
#### PLEASE PRINT

I. Name of Lobbyist(s):	Paul A. Worsowicz; Ari B. Pollack; Heidi L. Kroll; Robert J. Dietel			
II. Name of Lobbyist's partn	ership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & 214 North Main Street, Con			
603-228-1181	603-226-3334	worsowicz@gcglaw.com		
(Telephone)	(Fax)	(Email)		
	Choose one – file separate reports for ns which are not attributable to any o	each client, OR you may file a separate report for one client.)		
All reportable transaction	ons occurring in the month prior to the	reporting date relative to the following client.		
	HOME BUILDERS & REMODELER	RS ASSOCIATION OF NH		
(Full	Name of Client as it appears on the Lo	bbyist Registration Form)		
All reportable transaction unrelated to any particular		ist's family), or the lobbying firm listed below which ar		
IV. Date of Report: A	oril 25, 2018 🗵	July 25, 2018 □		
<u>-</u>	om date of registration to 3/31/18	activity from 4/1/18 to 6/30/18		
Oc	etober 31, 2018 □	January 30, 2019 □		
	from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/18		
<i>ac,</i>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	ceived and no reportable transaction just this form and submit it to the Secre	s made since the last report.  etary of State's Office, State House, Room 204,		
VI. Check if additional report	rts are attached: es or made expenditures, you must file a	Addendum A – Fees and Expenses		
If you have paid an hon Expense Reimbursemen	nt -	nust file <b>Addendum B</b> – Report of Honorariums or ns, you must file <b>Addendum C</b> – Political Contribution		
Sworn Statement/Affirmation I have read RSA 15, RSA 15-B to the best of my knowledge an	and RSA 664 and hereby swear or affin	rm that the foregoing information is true and complete		
(Signature of Lobbyist)	trowing	(Date)		
Paul A. Worsowicz	V			
(Print Name of lobbyist)				

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APR 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE



#### STATE OF NEW HAMPSHIRE **Lobbyists Fees and Expenses** Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist'	s partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTE	RELL, P.C.		
	(Name of partnership, firm or corpora			
III. Name of Client	HOME BUILDERS & REMODELERS ASSOCIATION OF NH	Date	April 25, 20	018
lobbying, including fee	unt of all fees received from the client identified aboves for services such as public advocacy, government renitoring legislation, and related legal work. The gross	elations, or	public relation	ns services,
a) Total of all fees rec	eived in this reporting period		a) \$	12,701.00
	eived this calendar year, prior to this reporting period the total prior monthly reports for this calendar year.)		b) \$	
c) Total of all fees reco (Add lines a and b)	eived to date.		c) \$ 	12,701.00
d) Indicate the amount yet been paid.	of any such fees that are due, but have not		d) \$	4,167.00
fees. Separate reports lobbyist(s)/firm that are are to be reported in or reporting period for sa expenses where the expenses where the expenses where the expenses of a ceremon statement of each individual covered by (a) (for exagiven to the subject of legislative reception).	partnerships, firms, or corporations are required to are to be filed for expenditures made relative to each e unrelated to any one client a separate report may be one of three categories of expenses: (a) the aggregalaries, benefits, support staff, and office expenses; conditure was of \$25.00 or less (for example: meals less, purchase of a pen with a value of less than \$10 it also bject given to a person being lobbied with a valuational expenditure made during this reporting period of including the purchase of a meal with value of greater than \$25 to be purchase of a meal with value of greater than \$25 to be purchase for honorariums, expense reimbursement, and should not be reported on Addendum A.	client and i e filed for to gate total o (b) the ag purchased that is give the of \$25.00 of greater the \$25, purcha eater than \$	f expenditures the lobbyist(s) f all expenses gregate total during a busing to the person or less); and \$25.00 for se of a ceremos \$50, restaurant	are made by the firm. Expensed paid during the formal individual tests lunch where the being lobbied (c) an itemized any purpose no inial object to be the expenses for
support staff, and office	enses for this reporting period for salaries, benefits, e expenses, related directly or indirectly to lobbying.  xpenditures during this reporting period, not reported	a) \$ b) \$		12,501.00
in a), of \$25 or less.	xpenditures during this reporting period, not reported			.00_
	expenditures reported in detail in section VI.	c) \$		

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: HOME BUILDERS & REMODELERS ASSOCIATION OF NH		
d) Total expenses for this reporting period.		
(Add lines a, b and c.)	d) \$	12,701.00
e) Total of expenses paid this calendar year, prior to this reporting period.  (This should be the amount on line f of addendum A for last month's report.)	e) \$	
f) Total of all expenses year to date.	f) \$	12,701.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees period, including by whom paid or to whom charged.	during this	reporting
Paid to:	Am	ount
State of NH	\$	200.00
State of NH	\$	
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	— 💲 —	· · · · · · · · · · · · · · · · · · ·
	_ <u>*</u>	<del>_</del> -
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the fe is true and complete to the best of my knowledge and belief.	oregoing in	nformation
	14 -18 Date)	
(Signature of lobbyist) (1	Date)	
Paul A. Worsowicz		

(Print Name of Lobbyist)

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn	Stater	nent/Aff	irmat	tion by	Lobbyist
Statem	ent of	Income	and l	Expens	es for:

Statement of Income and Expenses for:					
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Home Builders & Remodelers Association of NH					
Date of Report (check one):					
April 25, 2018   ✓ July 25, 2018   October 31, 2018   January 30, 2019   January 30, 2019					
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
1 Addendum A(s).					
0 Addendum B(s).					
0 Addendum C(s).					
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
(Signature of Lobbyist)  (Date)					
Ari B. Pollack (Print Name of lobbyist)					

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Statement of Inco	me and Expenses for:			
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.				
Name of Client (leaparticular client):	ave blank if Statement is for	the partnership, firm, or co	rporation and not related to any	
Date of Report (ch	eck one):			
April 25, 2018 🔀	July 25, 2018 □	October 31, 2018 🗆	January 30, 2019 □	
I have read RSA 15 following Addendu submitted):	RSA 15-B, RSA 664, the sms submitted with that State	Statement of Income and Exement (insert the number of	xpenses described above, and the Addendum forms being	
1 Addendum A	(s).			
0 Addendum B(	s).			
0 Addendum C(	s).			
I hereby swear or at complete to the best	firm that the foregoing info	rmation on the Statement aref.	nd each Addendum is true and	
(Signature of Lobb	. Kuy		4/18/18	
(Signature of Lobb)	yist)		(Date)	
Heidi L. Kroll	1:-4)			
(Print Name of lob	DVISTI			

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Statement of Income a	nd Expenses for:		
Name of Lobbying parts	nership, firm or corpora	tion: GALLAGHER, CAI	LAHAN & GARTRELL, P.C.
Name of Client (leave b particular client): H	lank if Statement is for ome Builders & Remo	the partnership, firm, or condelers Association of NH	poration and not related to any
Date of Report (check o	ne):		
April 25, 2018	July 25, 2018 🗆	October 31, 2018	January 30, 2019 □
I have read RSA 15, RS following Addendums s submitted):	A 15-B, RSA 664, the Submitted with that State	Statement of Income and Exement (insert the number of	spenses described above, and the Addendum forms being
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affirm complete to the best of n	that the foregoing information that the foregoing information with the state of the	rmation on the Statement an	nd each Addendum is true and
and Dit	, A		4/17/13
(Signature of Lobbyist)			(Date)
Robert J. Dietel			
(Print Name of lobbyist	t)		